

Doctor _____ CASE# _____
 Address _____
 City / State _____ Zip _____
 Phone (____) _____ Sex _____ Age _____
 Patient _____ DUE _____



1243 E. Broadway Road, #201
 Tempe, AZ 85282
Ph (480) 449-0909
 Fax (480) 449-0999

SHADE: _____
PREP SHADE: _____
 Mould: _____

Occl. Stain:
 None
 Light
 Medium
 Dark

ALL CERAMIC

- E-Max® LT/HT Stained Veneer / Crown
- E-Max® LT/HT Layered Veneer / Crown
- Empress Esthetic Layered Veneer / Crown
- IPS E-Max® Crown
- IPS Inlay/Onlay
- Full Zirconia (Bruxer)
- Zirconia Crown (Layered)
- LAVA®

PORC. FUSED TO METAL

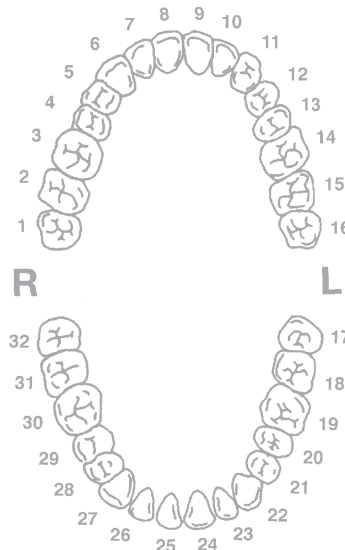
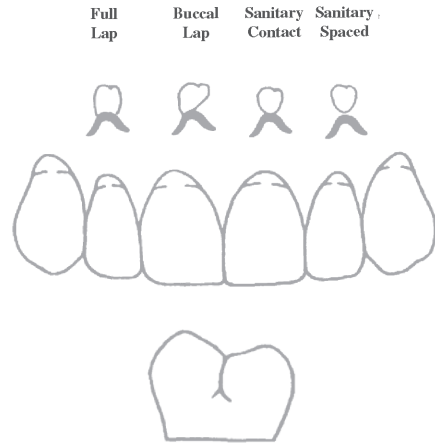
- Non-Precious
- Noble, Semi-Precious
- High Noble, Precious
- Porc. Butt Margin
- Porc./Met. Occlusal
- CAPTEK

ALL METAL

- Full Gold Crown
- Gold Inlay/Onlay

IMPLANTS

- T1 Abutment Stock / CAD-CAM
- Ceramic Abutment / CAD-CAM
- Custom Abutment



FRAMEWORK

- Metal
- Chrome/Vitallium
- Valplast
- Combination - Metal w/Ultraflex Clasp

MAJOR CONNECTOR

- Maxillary
- Horseshoe
 - Palatal Strap
 - A-P Strap
 - Full Coverage
- Mandibular
- Lingual Bar
 - Lingual Plate

Pt. Name in Denture

- YES
- NO

CLASPING

- Wrought Wire/Location _____ Tooth # _____
- Akers/Location _____ Tooth # _____
- I Bar/Location _____ Tooth # _____
- T Bar/Location _____ Tooth # _____
- Modified T Bar/Location _____ Tooth # _____
- Lab Select

RESTS

- Mesial/Location _____ Tooth # _____
- Distal/Location _____ Tooth # _____
- Cingulum/Location _____ Tooth # _____
- Embrasure/Location _____ Tooth # _____
- Lab Select

ACRYLIC

- Full Denture U/L
- Immediate Denture U/L
- Flipper U/L
- Night Guards U/L - Hard/Soft/Combo
- Temporary Crown
- Reline
- Custom Impression Tray

- Surgical Guide
- CT Stent
- Implant Index/Jig
- Space Maintainer
- Ultraflex Clasp

ENCLOSED

- Impressions
- Master Model
- Opposing Model
- Bite
- Photo
- Implant Parts
- Other _____

Signed _____ D.D.S. Dentist's License Number _____ Date _____

All accounts due within 30 days of statement date. A service charge of 2% per month or 24% annual will be added to past due accounts.
 Person signing this authorization accepts sole responsibility for payment, and agrees to pay all legal costs in the event of suit, including reasonable attorney fees.